



Connecting Health and Health Care

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Louisiana Birth Cohort Learning Session
Department of Health and Hospitals
October 18, 2011

Philosophy

We strive to improve health and health care by:

- Motivating and building will for change with hope and optimism
- Innovating and identifying new models of care
- Ensuring the broadest possible adoption of leading practices through a philosophy of “All Teach All Learn.”

IHI Believes In:

- Transparency
- Improvement science
- Effective leadership
- Creating a safe and just environment for patients, families, and staff
- Highly functioning teams
- Patient centered care
 - Designing care with the patient involved, not with just the patient in mind.

What Outcome Are We Aiming For?

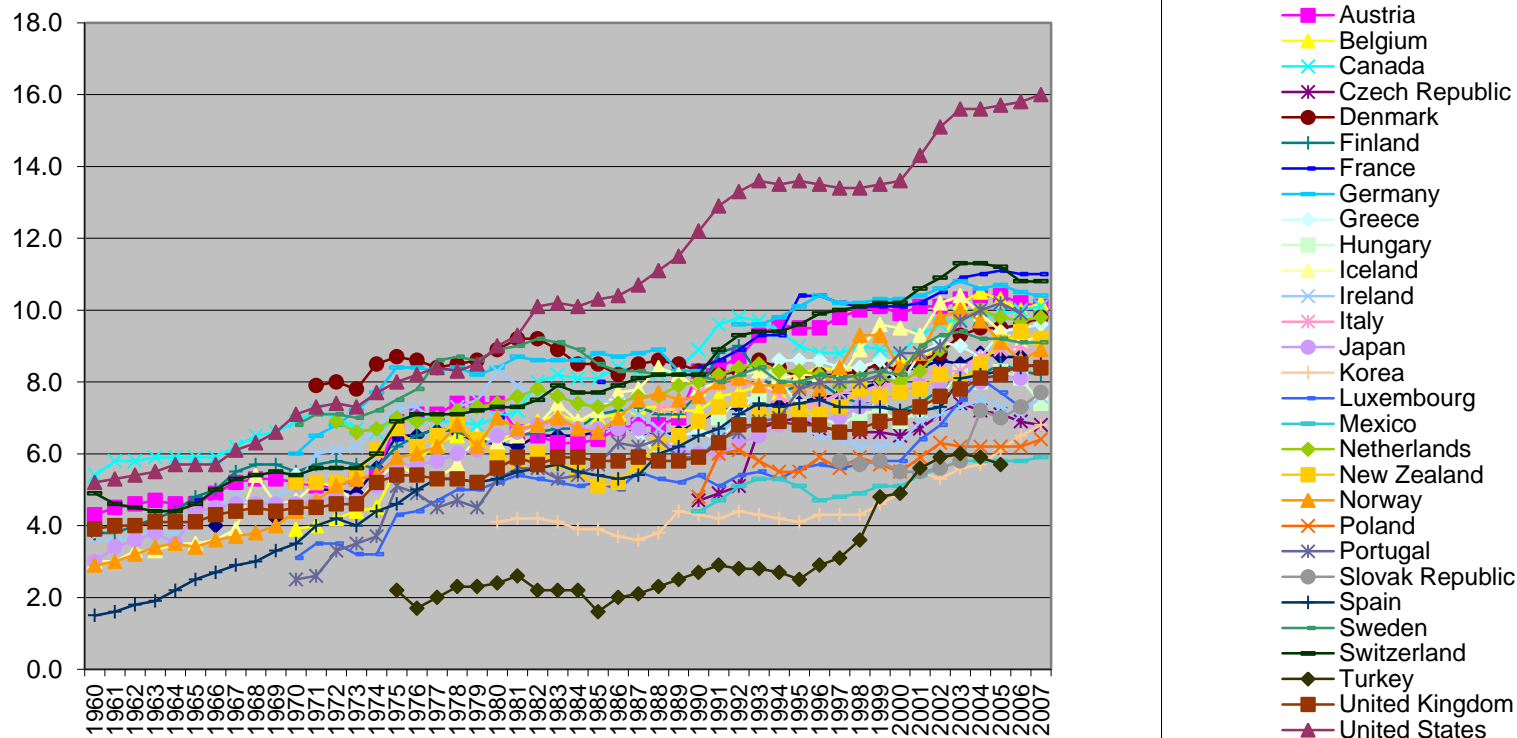
To improve health and the
value of health care.

Three Aims

- Advancing Population Health
- Improving Experience of Care
- Controlling Per Capita Cost

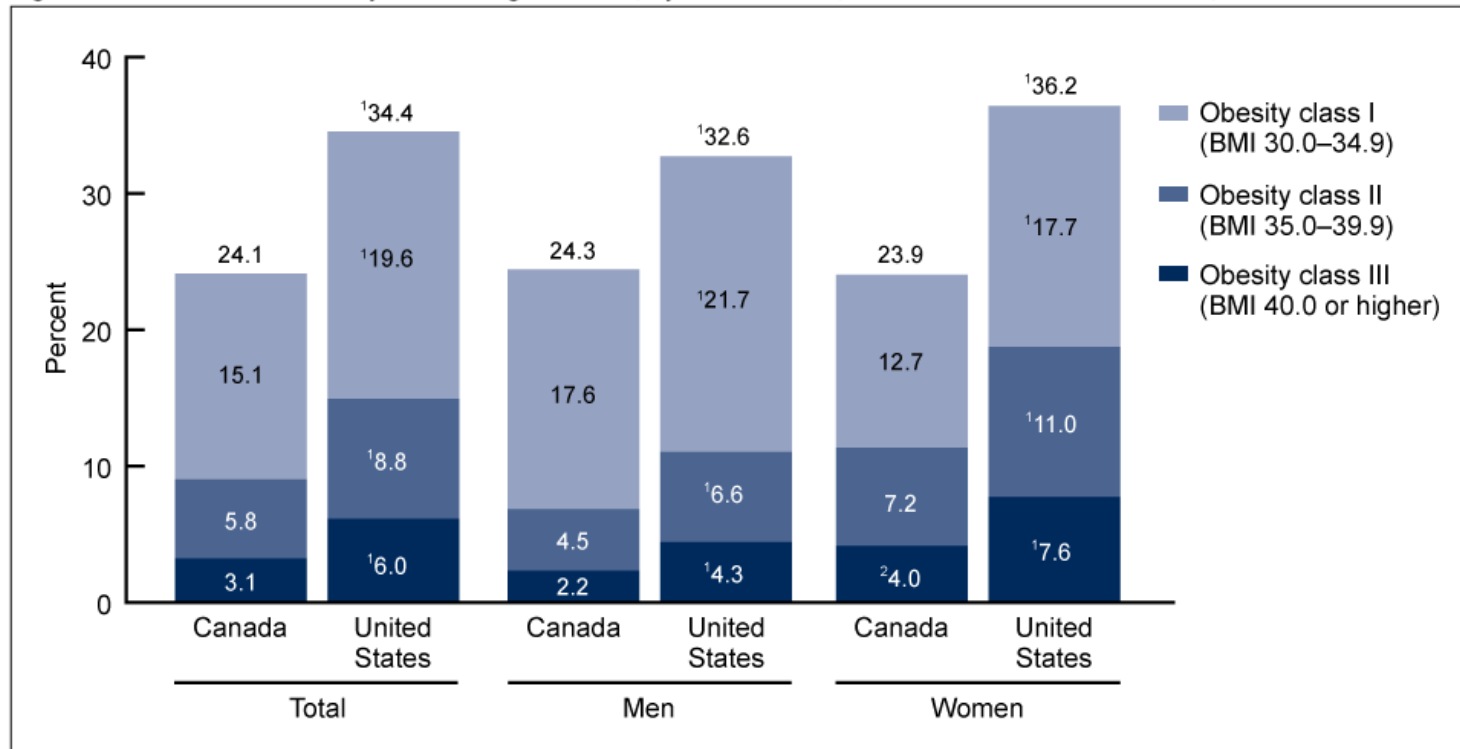
Rising Expenditures

OECD 2009: Total Expenditure on Health, % Gross Domestic Product



Obesity Rates

Figure 1. Prevalence of obesity in those aged 20–79, by sex: Canada, 2007–2009 and United States, 2007–2008



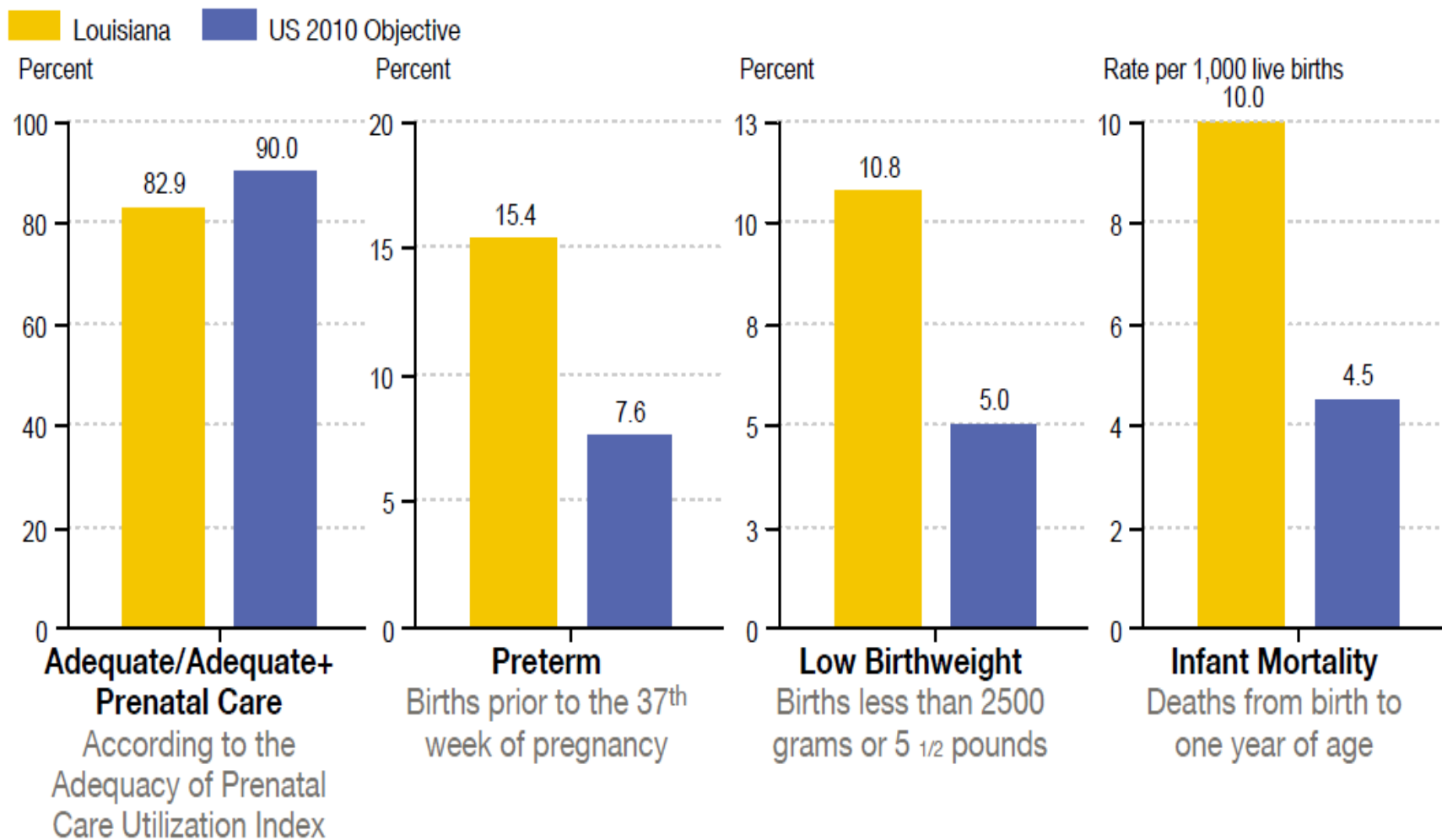
¹Significantly different from estimate for Canada ($p < 0.05$).

²Use with caution (coefficient of variation 16.6%–33.3%).

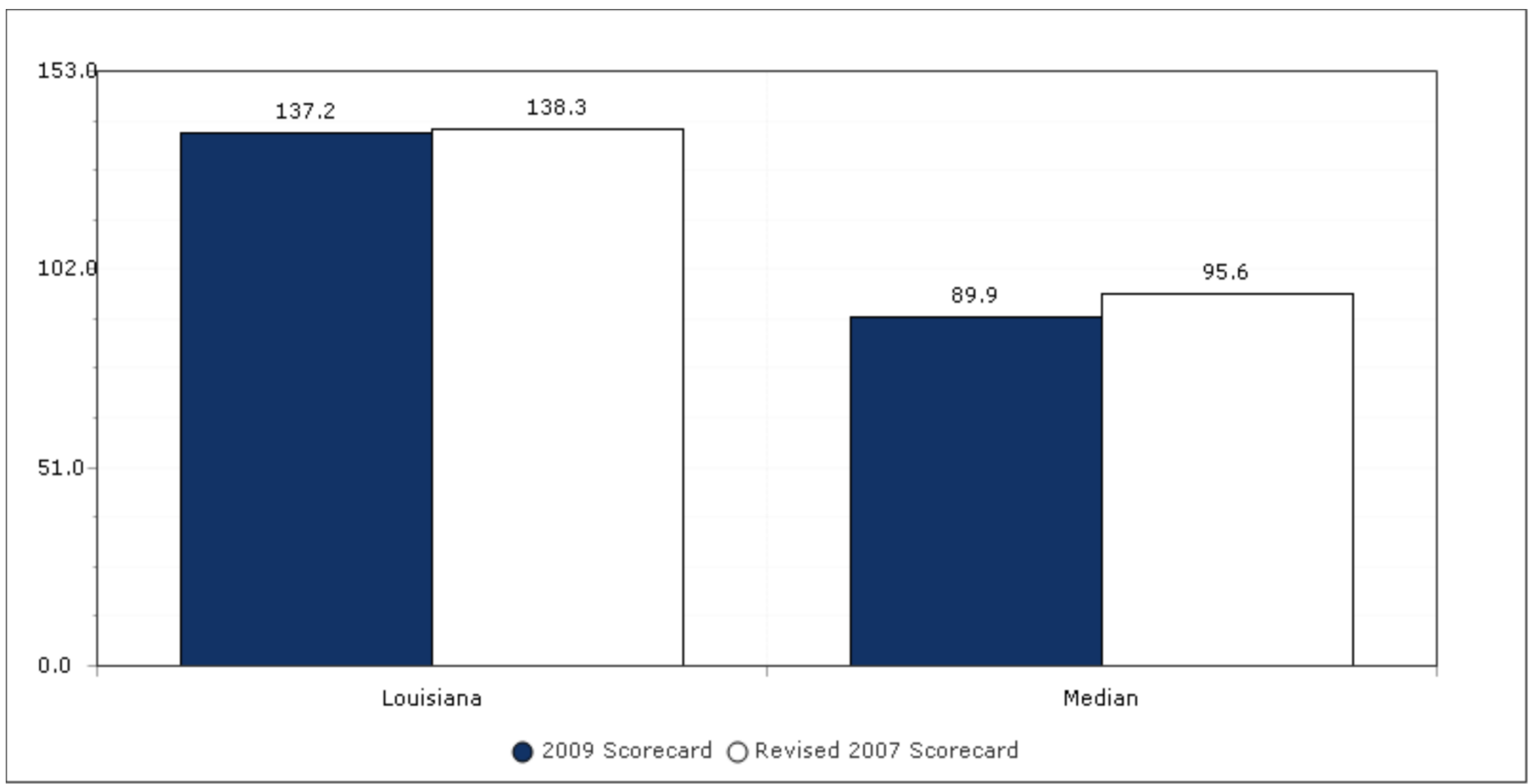
NOTES: BMI is body mass index. Estimates were age-standardized by the direct method to the 2000 United States Census population using age groups 20–39, 40–59, and 60–79. Pregnant women are excluded. Obesity class estimates do not sum to exact totals due to rounding.

SOURCES: CDC/NCHS, 2007–2008 National Health and Nutrition Examination Survey and 2007–2009 Canadian Health Measures Survey.

Louisiana and US Year 2010 Objectives^{1, 2}



Mortality Amenable to Health Care, Deaths per 100,000

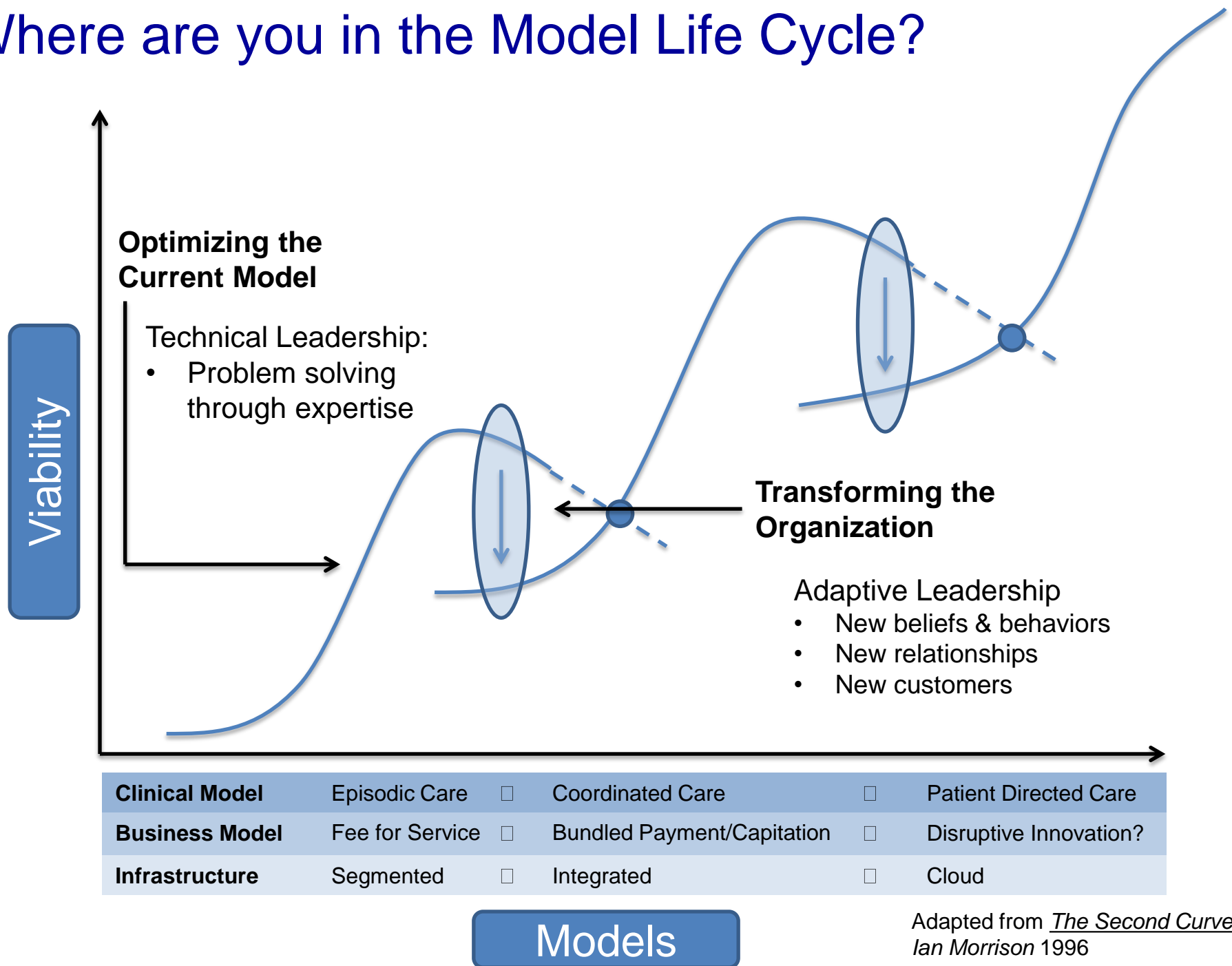


Source: Commonwealth Fund State Scorecard on Health System Performance, 2009

2009 Data: Rutgers Center for State Health Policy analysis of CDC mortality data (NCHS, MCD n.d.) following methods used by Nolte and McKee (2003).

Revised 2007 Data: Rutgers Center for State Health Policy analysis of CDC mortality data (NCHS, MCD n.d.) following methods used by Nolte and McKee (2003).

Where are you in the Model Life Cycle?



Adapted from *The Second Curve*,
Ian Morrison 1996

An Example

- American Fork Hospital OB with Utah Regional Medical Center developed the first nasal continuous positive airway pressure (NCPAP) protocol for “almost” term newborns who develop respiratory distress syndrome.
- This bundle meant that about 65 fewer American Fork Hospital infants were intubated for mechanical ventilator support each year at the Utah Valley NICU.
- Payments by insurers fell by over \$800,000, while Intermountain lost about \$330,000 in actual operating margins.
- Deployed protocol system wide, turning a \$330,000 margin into losses totaling between \$5 - \$10 million.

Accountable Care Organizations

DIFFERENT FORMS OF ACCOUNTABLE CARE ORGANIZATIONS

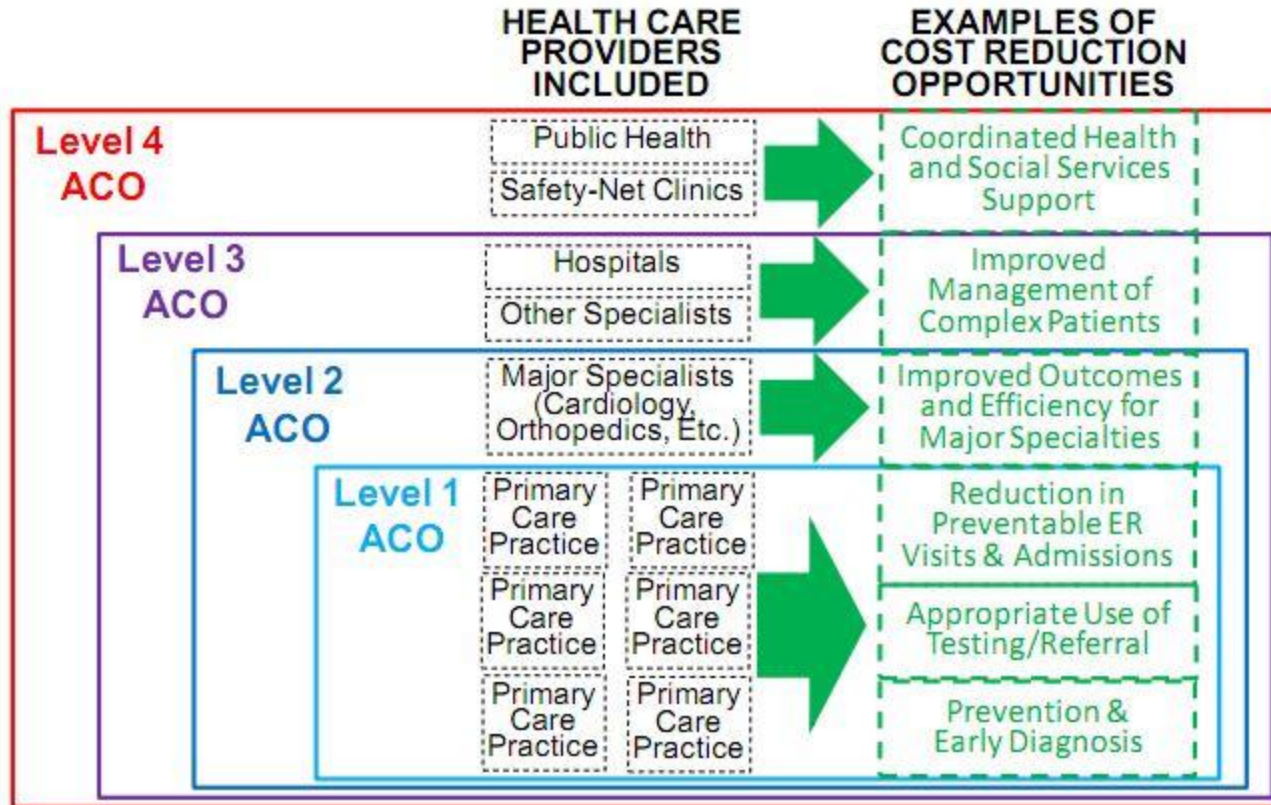


FIGURE 4

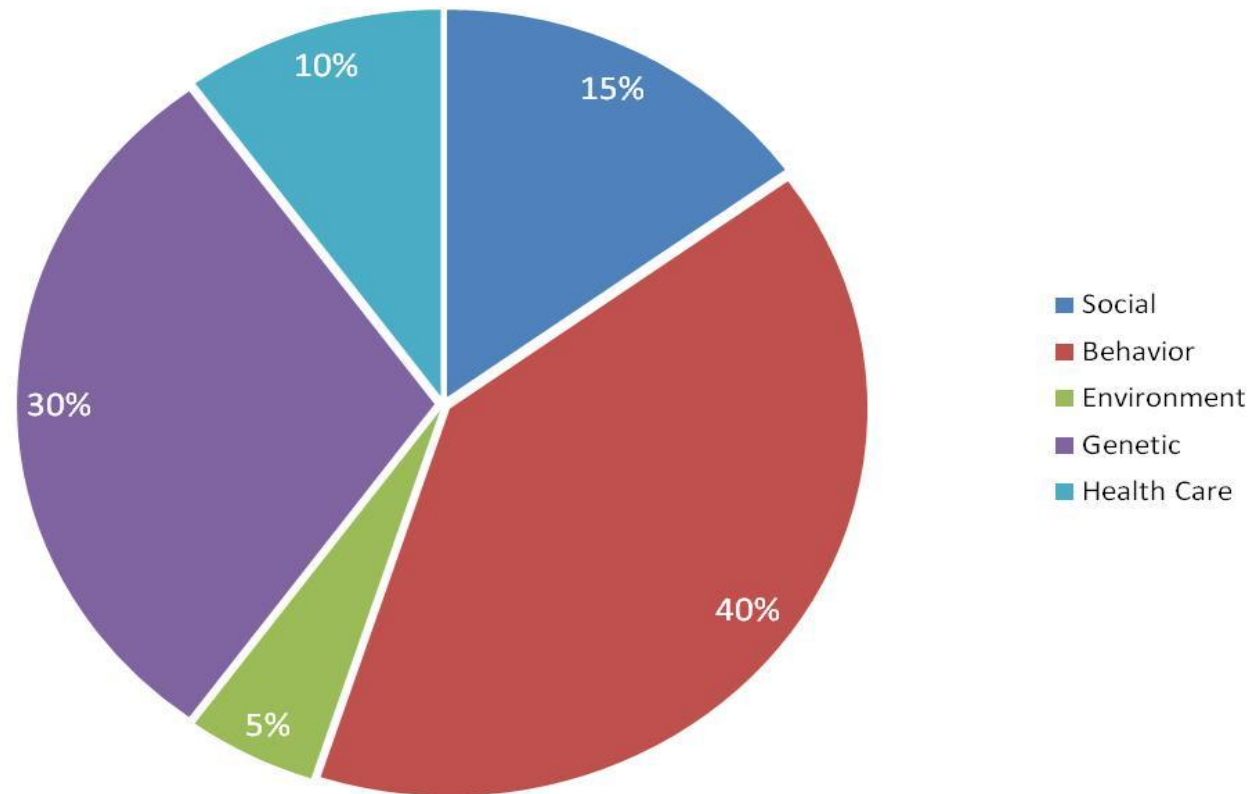


Better Care for Individuals, Better Health for Populations, and Lower Per Capita Costs

- Better Care for Individuals
- Better Health for Populations
- Lower Per Capita Costs

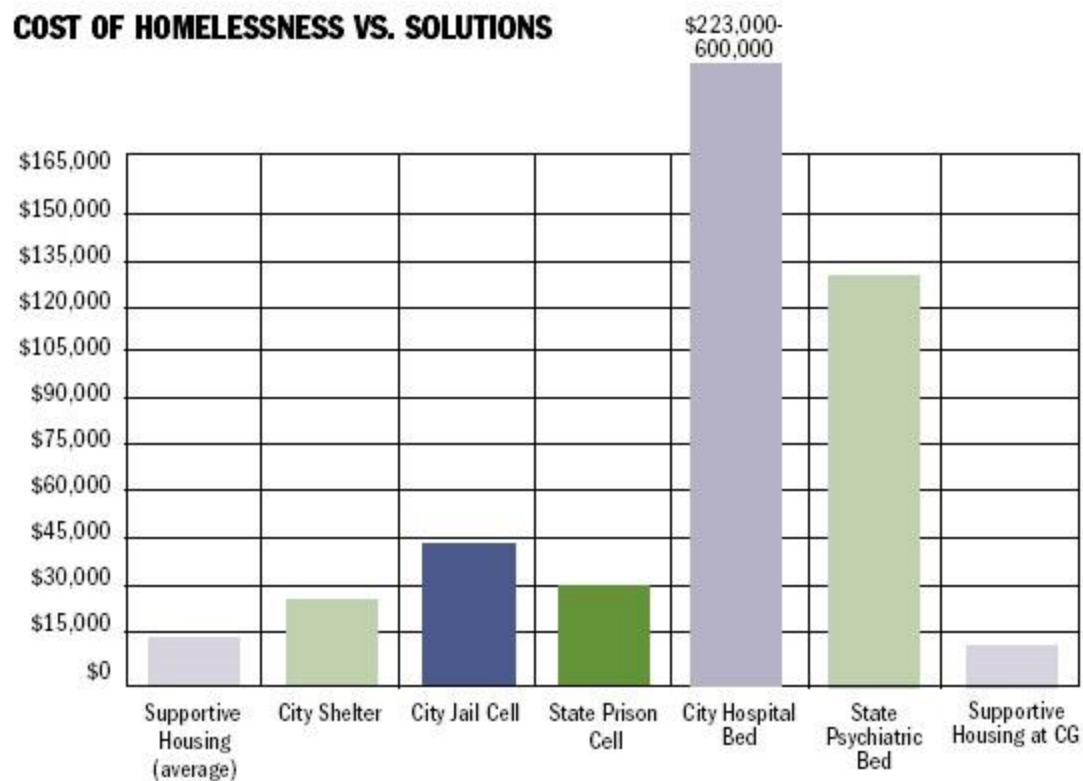
Health and Mortality

The Leading Determinants Of Health

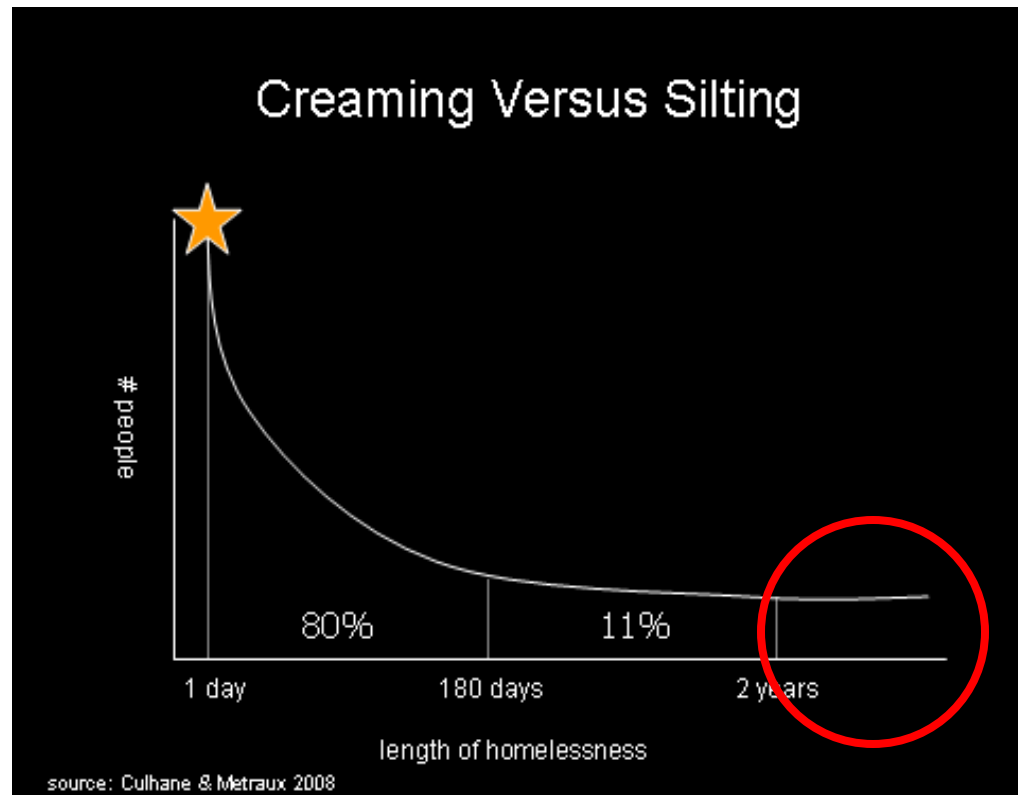


Source: McGinnis, JM et al Health Affairs
Apr 2002

COST OF HOMELESSNESS VS. SOLUTIONS

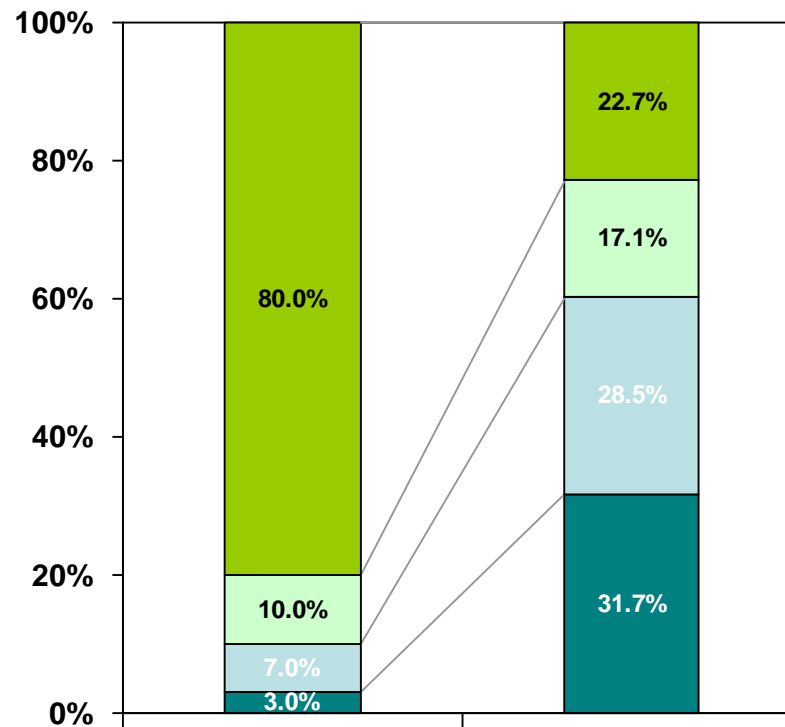


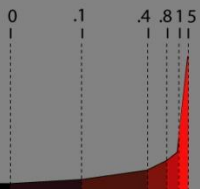
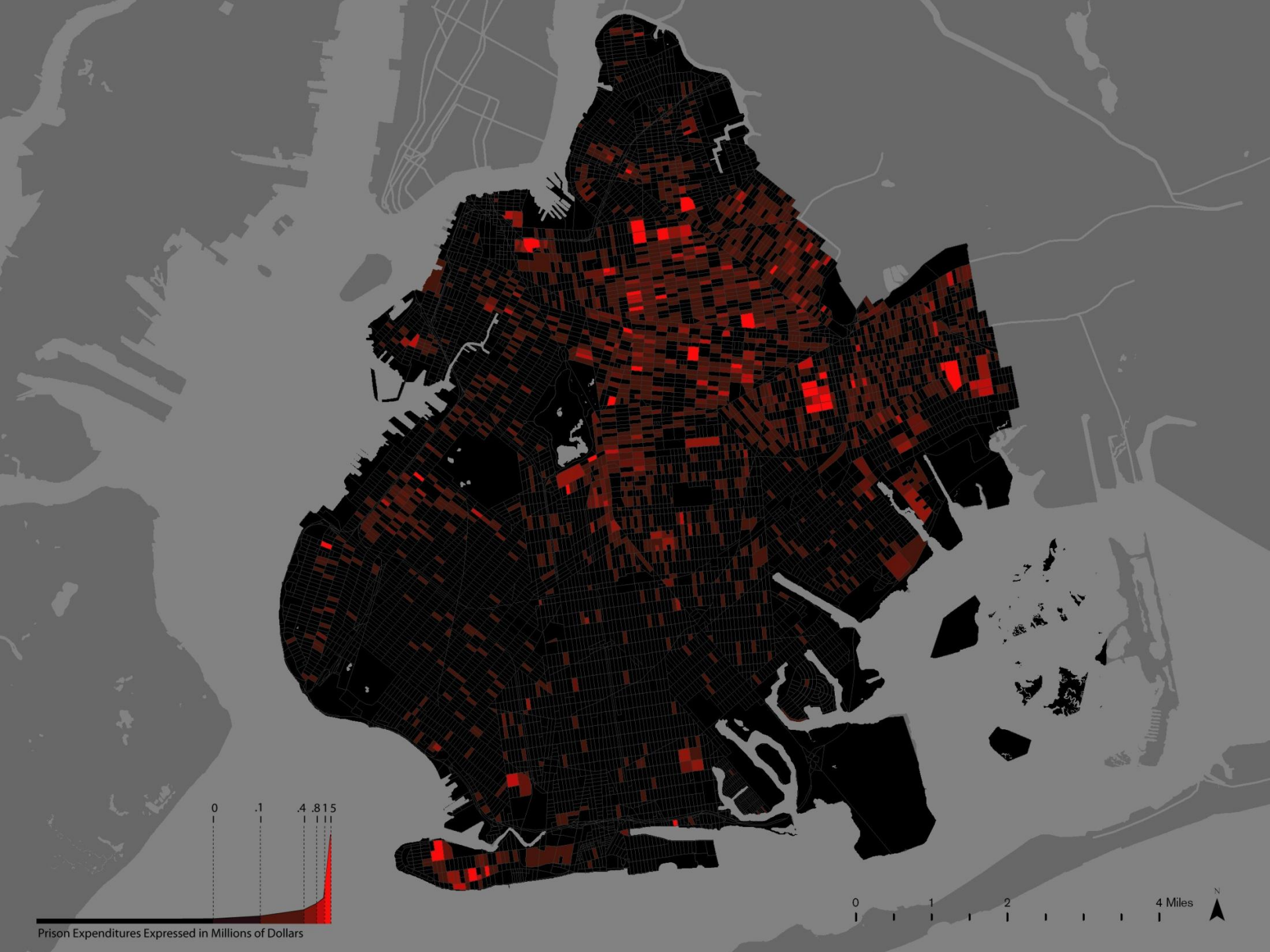
Power Law of Homelessness



HIGH COST MEDICAID PATIENTS

An Analysis of New York City Medicaid High Cost Patients - March 2004



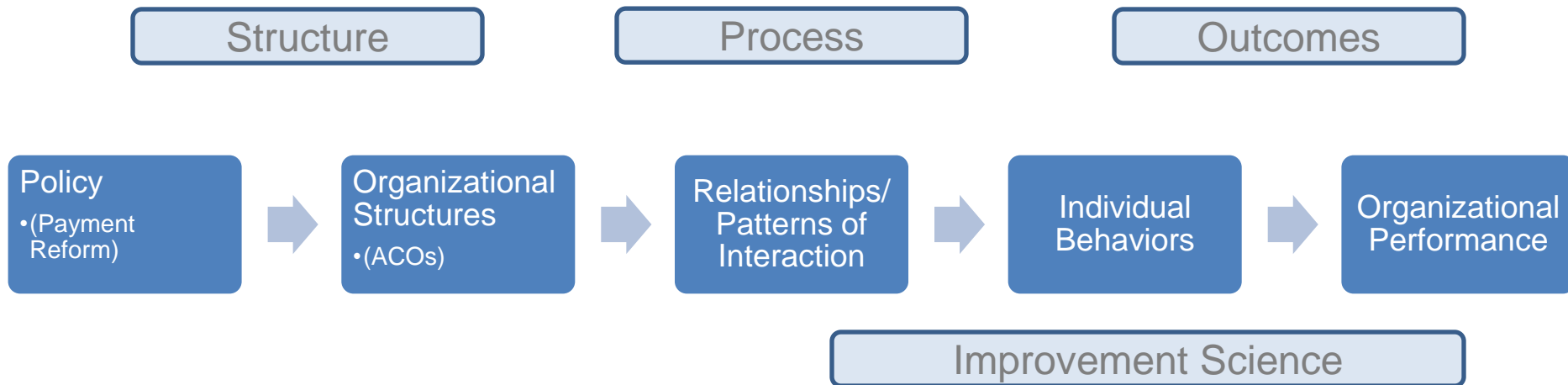


Prison Expenditures Expressed in Millions of Dollars



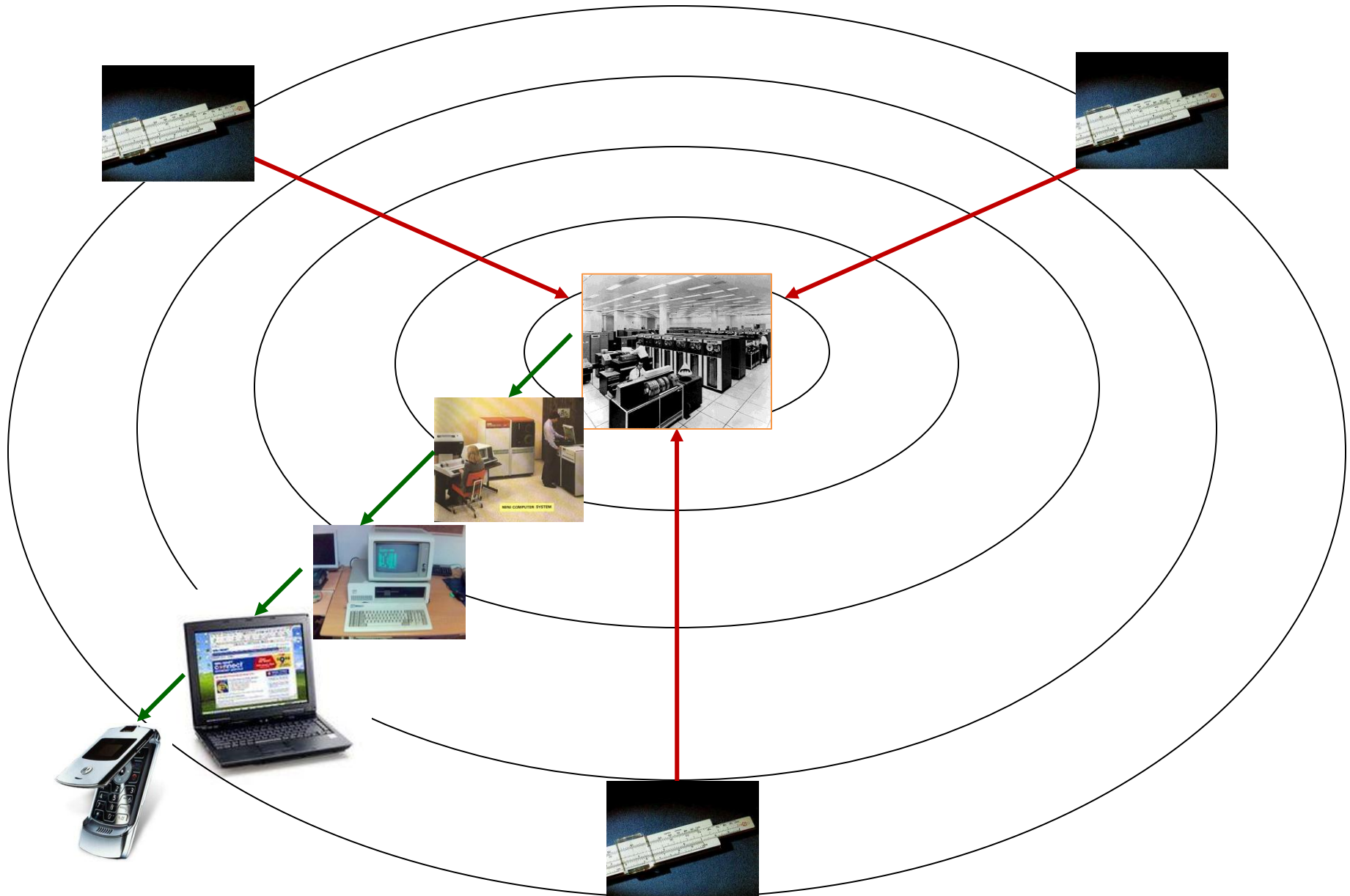


Will Changes in Models Force Changes in Structure and Systems?

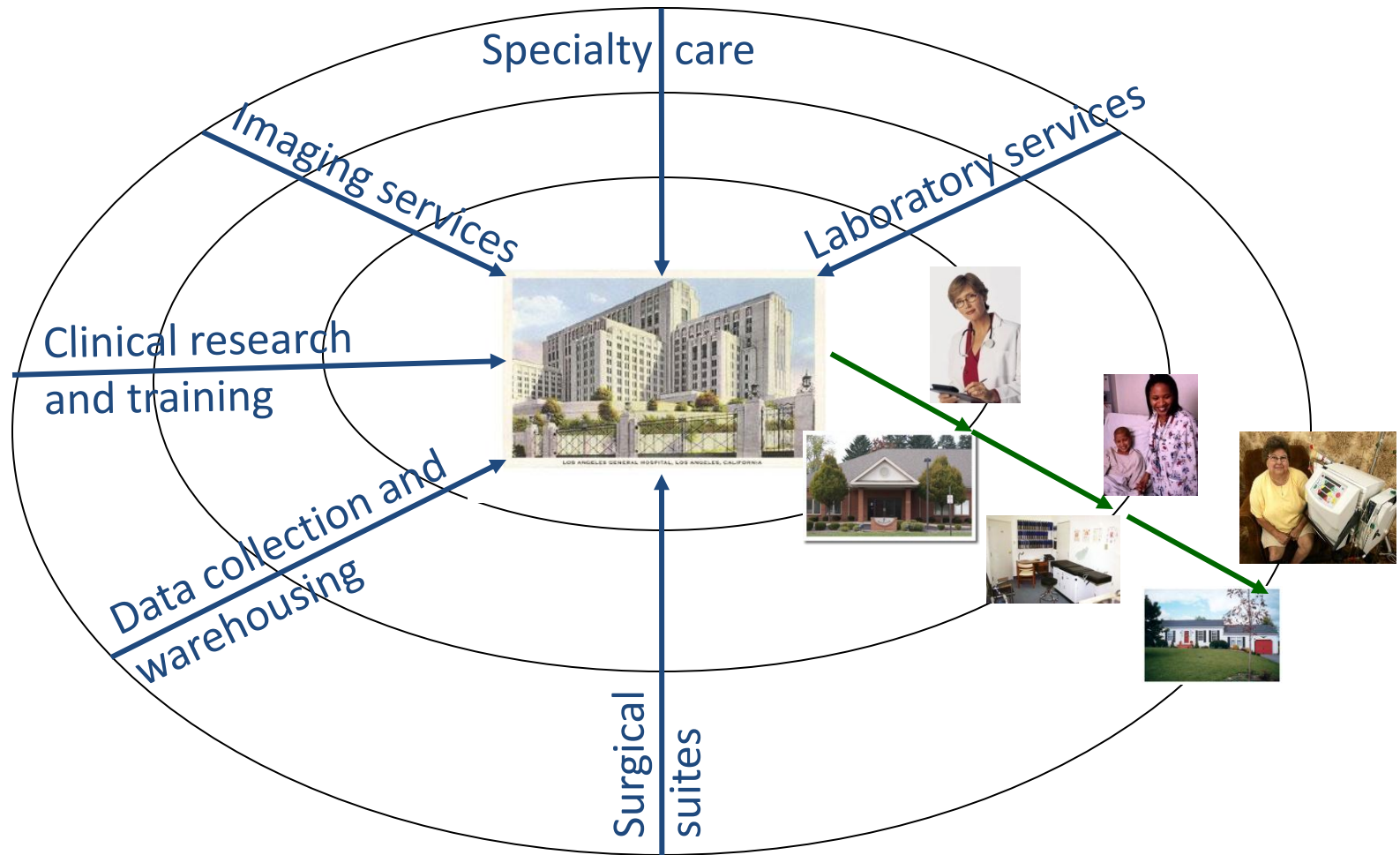


Disruptive Innovation

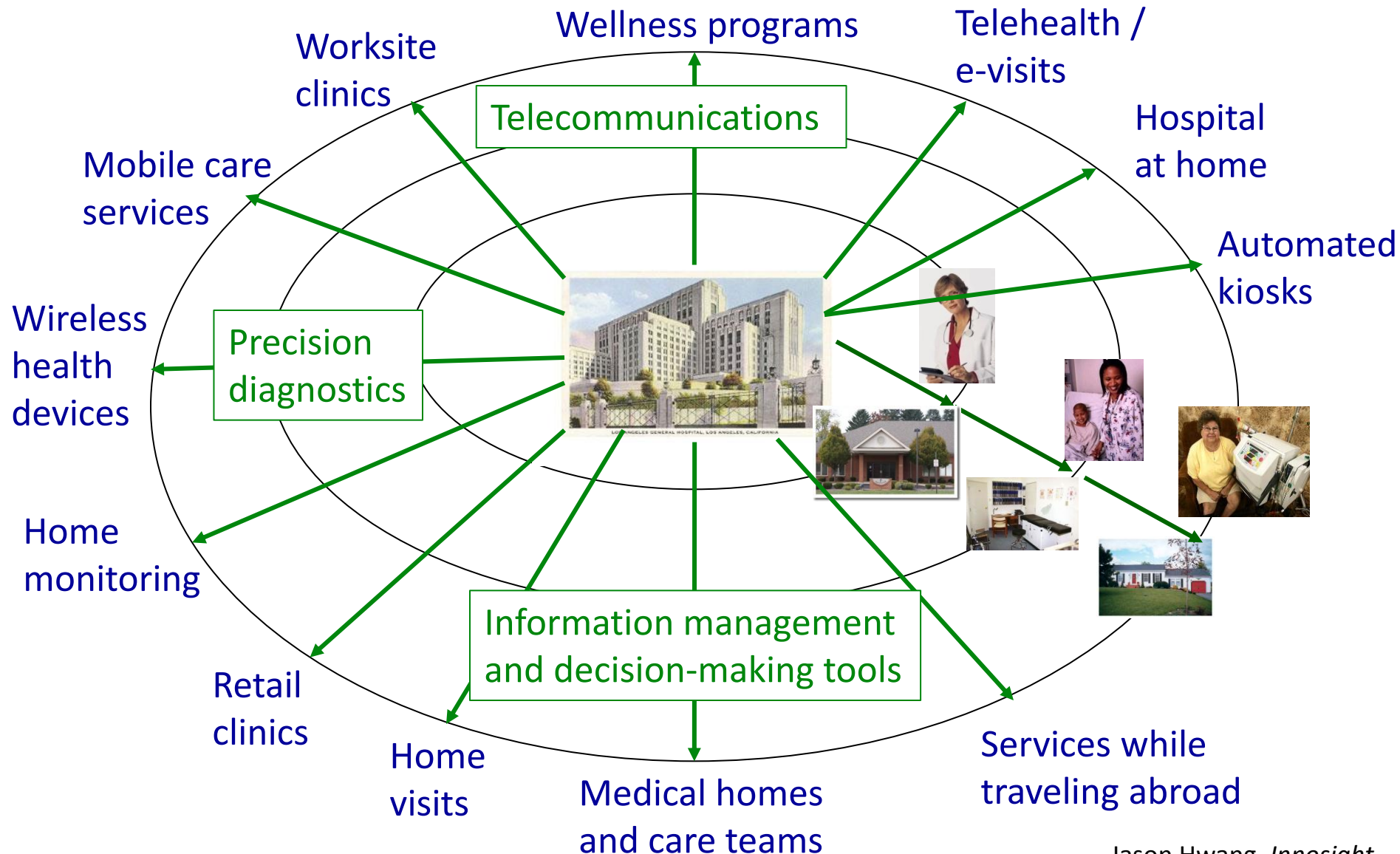
Centralization followed by decentralization in computing



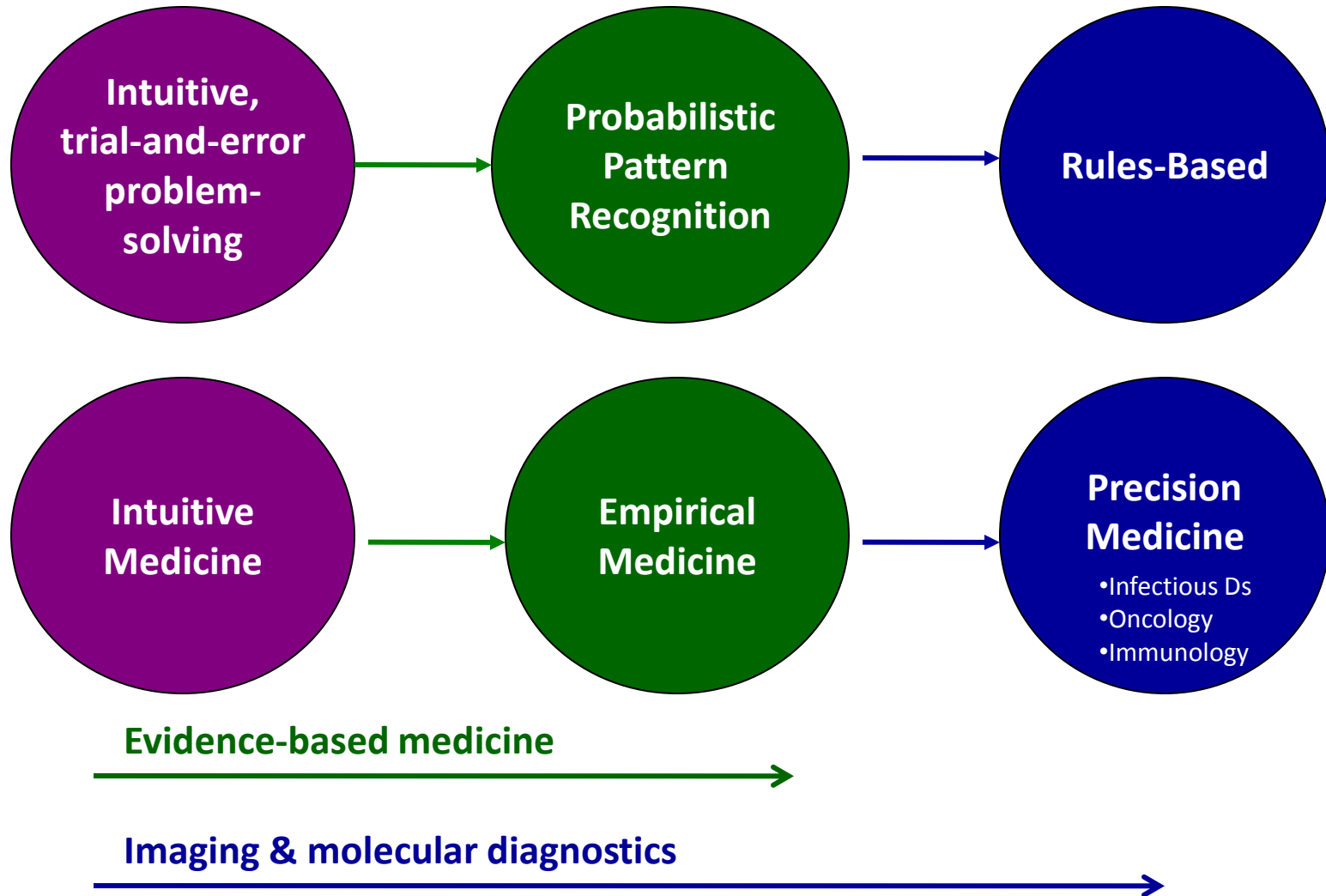
The decentralization that follows centralization is only beginning in health care



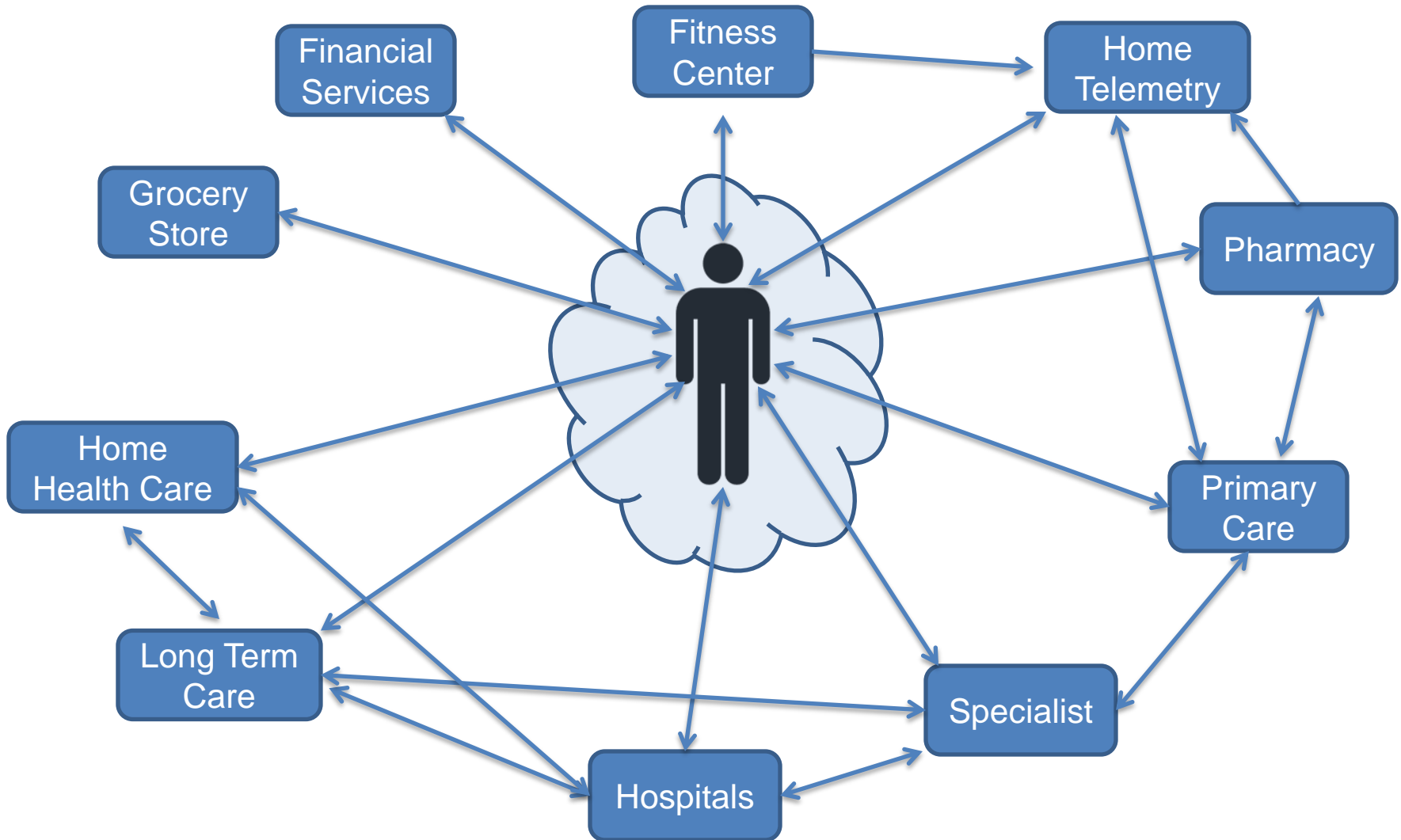
A new ecosystem of disruptive business models must arise



Simplifying technologies enable disruption by making work less dependent upon trial-and-error experimentation



The Patient's Health Record Cloud Infrastructure



MIT Media Lab

John Moore, M.D.



The doctor-patient relationship is deteriorating. Today's information technology solutions are exacerbating the problem by perpetuating paternalistic decision-making and episodic care. CollaboRhythm is a technology platform that enables a new paradigm of healthcare delivery; one where patients are empowered to become active participants and where doctors and other health professionals are transformed into real-time coaches. We believe that this radical shift in thinking is necessary to dramatically reduce healthcare costs, increase quality, and improve health outcomes.



The True Disruptors

Gilbert



When Gilbert Salinas was accidentally shot 19 years ago, he was taken to Los Angeles County + USC Medical Center. There, at one of the largest trauma centers in California, doctors treated his injury and kept him alive.

But faced with spending the rest of his life in a wheelchair, Gilbert needed more than life-saving *medical care*; he also needed life-changing *rehabilitation care*. And that's exactly what he found at Rancho Los Amigos National Rehabilitation Center in Downey. Doctors, nurses and therapists there gave him the confidence and the tools he needed to live a productive life, and Gilbert did the rest. Incredibly, Gilbert is now a member of Rancho's staff, as Director of Patient-Centered Care.

Trauma care. Rehabilitation care. Loving care. We're California's public hospitals, and we're here when you need us.



CALIFORNIA'S PUBLIC HOSPITALS.
DOING A WORLD OF GOOD.™

Christian





How do you lead
in this kind of environment?

References

The Tasks of Leadership

John W. Gardner

1986

The Work of Leadership

R. Heifitz and D. Laurie

1997

When Leadership Spells Danger

R. Heifitz and Marty Linksy

2004

The Wise Leader

I. Nonaka and H. Takeuchi

2011

Governing the Commons

E. Ostrom

1990

Influencer: The Power to Change
Anything

Patterson, Grenny, et al

2008

The Wise Leader

Practical Wisdom

“No company will survive over the long run if it does not offer value to customers, create a future that rivals can’t, and maintain the common good.”

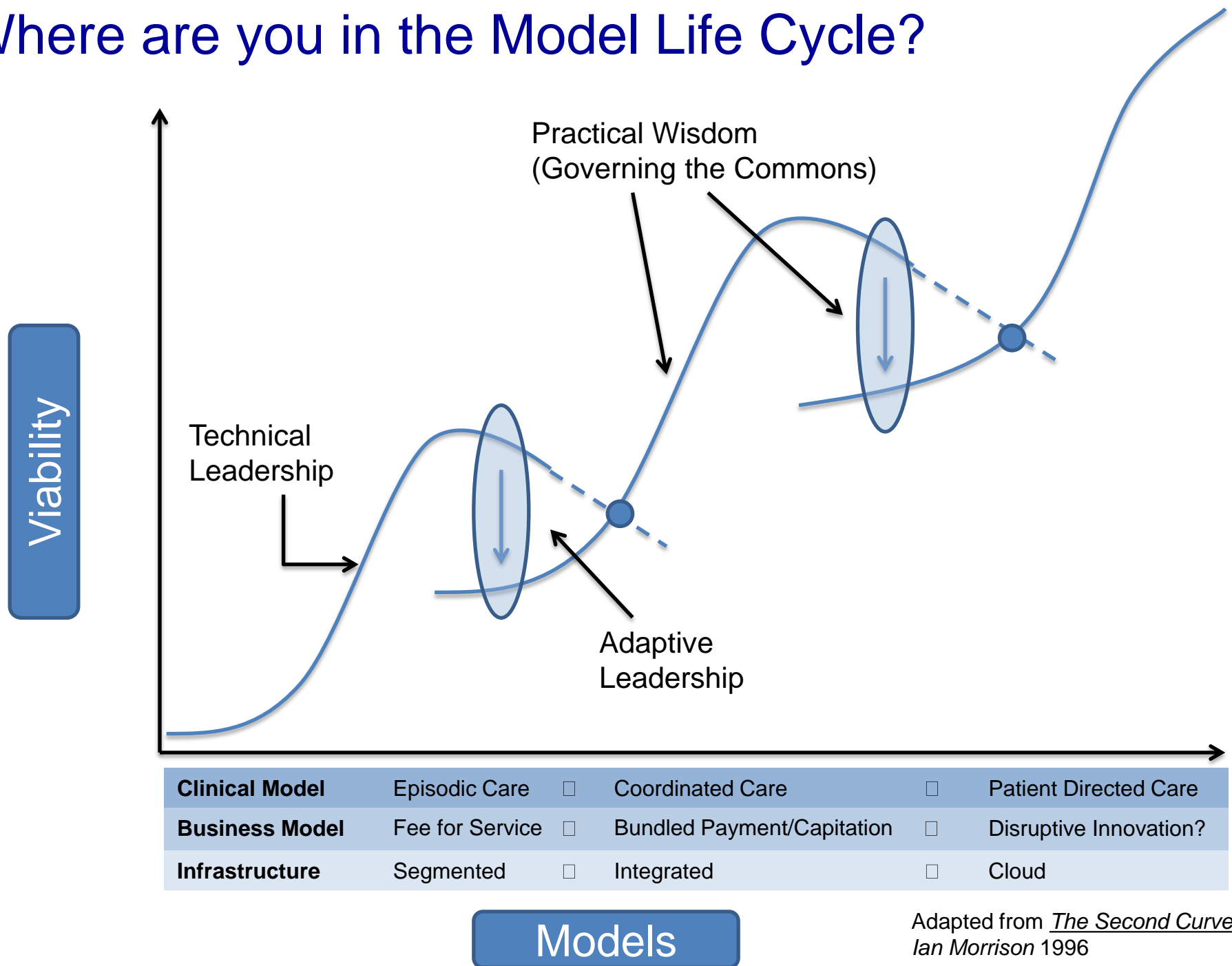
Role of the Leader

“Servants of what is.”

And,

“shapers of what might be.”

Where are you in the Model Life Cycle?



Adapted from *The Second Curve*,
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Leading Is Not Tidy

- Decisions are made and then reversed
- Misunderstandings are frequent
- Inconsistency is inevitable
- Inside every solution are the needs of new problems
- Most of the time most things are out of hand

Where are you in the Model Life Cycle?

